<u>AMENDMENTS TO THE CLA</u>IMS

Following is a complete set of claims as amended with this Response. This complete set of claims excludes cancelled claim 1 and includes amended claims 2-7, 9-15, 27, 35, 36, 38-41, 43, 44, 50, 51, 53-55, 57, 70-73.

1. (Cancelled)

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- 2. (Currently Amended) The method according to claim 4 <u>15</u>, wherein selectively adjusting one or more pacing parameters comprises varying a pacing rate.
- 3. (Currently Amended) The method according to claim 1, In a cardiac stimulation device, a method of monitoring myocardial ischemia comprising:

determining a sensor indicated heart rate;

pacing at the sensor indicated heart rate;

sensing an intracardiac electrogram signal;

detecting myocardial ischemia based on a change in the electrogram signal; and in response to detecting myocardial ischemia, ignoring the sensor indicated rate and selectively adjusting one or more pacing parameters;

wherein selectively adjusting one or more pacing parameters comprises varying an inter-ventricular timing interval.

4. (Currently Amended) The method according to claim 1, In a cardiac stimulation device, a method of monitoring myocardial ischemia comprising:

determining a sensor indicated heart rate;

pacing at the sensor indicated heart rate;

sensing an intracardiac electrogram signal;

<u>in response to detecting myocardial ischemia, ignoring the sensor indicated rate and selectively adjusting one or more pacing parameters;</u>

wherein selectively adjusting one or more pacing parameters comprises varying an inter-atrial timing interval.

- 5. (Currently Amended) The method according to claim 4 <u>15</u>, wherein sensing the intracardiac electrogram signal comprises sensing a differential signal between a coronary sinus lead electrode and a right ventricular lead electrode.
- 6. (Currently Amended) The method according to claim 4 <u>15</u>, wherein sensing the intracardiac electrogram signal comprises sensing a differential signal between an active electrode and a case electrode.
- 7. (Currently Amended) The method according to claim 4 <u>15</u>, wherein detecting myocardial ischemia comprises detecting a deviation of an ST-segment of the cardiac electrogram signal.
- 8. (Original) The method according to claim 7, wherein detecting the deviation of the ST-segment comprises detecting any of:

an elevation of the ST-segment relative to a PQ-segment; an elevation of the ST-segment relative to a TP-segment; a depression of the ST-segment relative to a PQ-segment; a depression of the ST-segment relative to a TP-segment; and an inversion of a T-wave.

9. (Currently Amended) The method according to claim 8, In a cardiac stimulation device, a method of monitoring myocardial ischemia comprising:

determining a sensor indicated heart rate;

pacing at the sensor indicated heart rate;

sensing an intracardiac electrogram signal;

detecting myocardial ischemia based on a change in the electrogram signal;

in response to detecting myocardial ischemia, ignoring the sensor indicated rate and selectively adjusting one or more pacing parameters; and

further comprising switching from a single-chamber ventricular stimulation mode to a biventricular stimulation mode;

wherein detecting myocardial ischemia comprises detecting a deviation of an STsegment of the cardiac electrogram signal; and

wherein detecting the deviation of the ST-segment comprises detecting any of:

an elevation of the ST-segment relative to a PQ-segment; an elevation of the ST-segment relative to a TP-segment; a depression of the ST-segment relative to a PQ-segment; a depression of the ST-segment relative to a TP-segment; and an inversion of a T-wave.

- 10. (Currently Amended) The method according to claim 4 <u>15</u>, further comprising waiting for a predetermined time delay before responding to the detection of myocardial ischemia.
- 11. (Currently Amended) The method according to claim 4 <u>15</u>, further comprising monitoring for myocardial ischemia when the pacing parameters are automatically adjusted, in response to a physiologic signal.
- 12. (Currently Amended) The method according to claim 4 <u>15</u>, further comprising monitoring for myocardial ischemia on a continuous basis.
- 13. (Currently Amended) The method according to claim 4 <u>15</u>, further comprising monitoring for myocardial ischemia on a periodic basis in a patient known to be susceptible to myocardial ischemia.
- 14. (Currently Amended) The method according to claim 4 <u>15</u>, further comprising monitoring for myocardial ischemia following a user-programmed change in stimulation parameters.

15. (Currently Amended) The method according to claim 1, In a cardiac stimulation device, a method of monitoring myocardial ischemia comprising:

determining a sensor indicated heart rate;

pacing at the sensor indicated heart rate;

sensing an intracardiac electrogram signal;

detecting myocardial ischemia based on a change in the electrogram signal; and in response to detecting myocardial ischemia, ignoring the sensor indicated rate and selectively adjusting one or more pacing parameters;

wherein sensing the cardiac electrogram signal comprises electrically coupling at least two sensing electrodes to form a single sensing electrode with an expanded surface.

- 16. (Original) The method of claim 15, wherein electrically coupling at least two sensing electrodes comprises temporarily shorting at least two sensing electrodes during a sensing window, within a ST segment.
- 17. (Original) The method of claim 16, wherein coupling at least two sensing electrodes comprises extending the ST segment for the full length of the ST segment.
- 18. (Original) The method according to claim 16, wherein electrically coupling at least two sensing electrodes comprises temporarily coupling at least two sensing electrodes by means of a switch.
- 19. (Original) The method according to claim 15, wherein electrically coupling at least two sensing electrodes comprises coupling at least two sensing electrodes on a coronary sinus lead.
- 20. (Original) The method according to claim 15, wherein electrically coupling at least two sensing electrodes comprises coupling at least two sensing electrodes on a right ventricular lead.

- 21. (Original) In a cardiac stimulation device, a method of monitoring myocardial ischemia comprising:
- electrically coupling at least two sensing electrodes to form a single sensing electrode with an expanded surface;
 - sensing an intracardiac electrogram signal using the single sensing electrode; and detecting myocardial ischemia based on a change in the electrogram signal.
- 22. (Original) The method according to claim 21, wherein electrically coupling at least two sensing electrodes comprises temporarily shorting at least two sensing electrodes during a sensing window, within a ST segment.
- 23. (Original) The method of claim 22, wherein coupling at least two sensing electrodes comprises extending the ST segment for the full length of the ST segment.
- 24. (Original) The method according to claim 21, wherein electrically coupling at least two sensing electrodes comprises temporarily coupling at least two sensing electrodes by means of a switch.
- 25. (Original) The method according to claim 22, wherein electrically coupling at least two sensing electrodes comprises coupling at least two sensing electrodes on a coronary sinus lead.
- 26. (Original) The method according to claim 22, wherein electrically coupling at least two sensing electrodes comprises coupling at least two sensing electrodes on a right ventricular lead.

27. (Currently Amended) A cardiac stimulation device that monitors myocardial ischemia, comprising:

an electrode having at least two sensing electrodes, the at least two sensing electrodes electrically coupled to form a single sensing electrode with an expanded surface;

a sensing circuit <u>coupled to the electrode to sense</u> that senses an intracardiac electrogram signal;

a control circuit that determines a sensor indicated heart rate;

a pulse generator that generates stimulation pulses at the sensor indicated heart rate:

an ischemia detector, connected to the ischemia sensing circuit, that detects myocardial ischemia based on a change in the electrogram signal; and

wherein the control circuit is responsive to detection of myocardial ischemia to ignore the sensor indicated rate and to selectively adjust one or more pacing parameters.

- 28. (Original) The device according to claim 27, wherein the pacing parameters comprise a pacing rate.
- 29. (Original) The device according to claim 27, wherein the pacing parameters comprise an inter-ventricular timing interval.
- 30. (Original) The device according to claim 27, wherein the pacing parameters comprise an inter-atrial timing interval.
- 31. (Original) The device according to claim 27, wherein the change in the cardiac electrogram signal comprises a differential signal between a coronary sinus lead electrode and a right ventricular lead electrode.

- 32. (Original) The device according to claim 27, wherein the change in the cardiac electrogram signal comprises a differential signal between an active electrode and a case electrode.
- 33. (Original) The device according to claim 27, wherein the myocardial ischemia is confirmed when a deviation of an ST-segment of the cardiac electrogram signal is detected.
- 34. (Original) The device according to claim 33, wherein the deviation of the ST-segment comprises any of:

an elevation of the ST-segment relative to a PQ-segment; an elevation of the ST-segment relative to a TP-segment; a depression of the ST-segment relative to a PQ-segment; a depression of the ST-segment relative to a TP-segment; and an inversion of a T-wave.

- 35. (Currently Amended) The device according to claim 27, further comprising a switch that to electrically coupling couple the at least two sensing electrodes to form a single sensing electrode with an expanded surface.
- 36. (Currently Amended) The device of claim 35, wherein the switch temporarily shorts the at least two sensing electrodes during a sensing window, within a ST segment.
- 37. (Original) The device of claim 36, wherein the ST segment extends for substantially the length of the ST segment.
- 38. (Currently Amended) The device according to claim 35, wherein the at least two sensing electrodes are located on a coronary sinus lead.
- 39. (Currently Amended) The device according to claim 35, wherein <u>the</u> at least two sensing electrodes are located on a right ventricular lead.

40. (Currently Amended) A cardiac stimulation device that monitors myocardial ischemia, comprising:

circuitry that is operative to electrically couple at least two sensing electrodes to form a single sensing electrode with an expanded surface;

an ischemia sensing circuit that senses a cardiac electrogram signal, using the coupled electrodes; and

an ischemia detector, connected to the ischemia sensing circuit, that detects myocardial ischemia based on a change in the electrogram signal.

- 41. (Currently Amended) The device according to claim 40, wherein the <u>a</u> switch shorts the at least two sensing electrodes during a sensing window, within a ST segment.
- 42. (Original) The device of claim 41, wherein the ST segment extends for substantially the length of the ST segment.
- 43. (Currently Amended) The device according to claim 40, wherein the at least two sensing electrodes are located on any one or more of a coronary sinus lead and a right ventricular lead.
- 44. (Currently Amended) A cardiac stimulation device that monitors myocardial ischemia, comprising:

means for determining a sensor indicated heart rate;

means for pacing at the sensor indicated heart rate;

means for coupling at least two sensing electrodes to form a single sensing electrode with an expanded surface;

means for sensing an intracardiac electrogram signal;

means for detecting myocardial ischemia based on a change in the electrogram signal; and

wherein in response to detected myocardial ischemia the pacing means comprises means for ignoring the sensor indicated rate and for adjusting one or more pacing parameters.

- 45. (Original) The device according to claim 44, wherein the pacing parameters comprise any one or more of:
 - a pacing rate; an inter-ventricular timing interval; and an inter-atrial timing interval.
- 46. (Original) The device according to claim 44, wherein the change in the cardiac electrogram signal comprises a differential signal between a coronary sinus lead electrode and a right ventricular lead electrode.
- 47. (Original) The device according to claim 44, wherein the change in the cardiac electrogram signal comprises a differential signal between an active electrode and a case electrode.
- 48. (Original) The device according to claim 44, wherein the myocardial ischemia is confirmed when a deviation of an ST-segment of the cardiac electrogram signal is detected.
- 49. (Original) The device according to claim 48, wherein the deviation of the ST-segment comprises any of:
 - an elevation of the ST-segment relative to a PQ-segment; an elevation of the ST-segment relative to a TP-segment; a depression of the ST-segment relative to a PQ-segment; a depression of the ST-segment relative to a TP-segment; and an inversion of a T-wave.
- 50. (Currently Amended) The device according to claim 44, further comprising a switch that electrically coupling couples the at least two sensing electrodes to form a the single sensing electrode with an the expanded surface.

- 51. (Currently Amended) The device of claim 50, wherein the switch temporarily shorts the at least two sensing electrodes during a sensing window, within a ST segment.
- 52. (Original) The device of claim 51, wherein the ST segment extends for substantially the length of the ST segment.
- 53. (Currently Amended) The device according to claim 50, wherein the at least two sensing electrodes are located on any one or more of: a coronary sinus lead and a right ventricular lead.
- 54. (Currently Amended) A cardiac stimulation device that monitors myocardial ischemia, comprising:

means for electrically coupling at least two sensing electrodes to form a single sensing electrode with an expanded surface;

means for sensing a cardiac electrogram signal, using the coupled electrodes; and means for detecting myocardial ischemia based on a change in the electrogram signal.

- 55. (Currently Amended) The device according to claim 54, wherein the <u>further</u> comprising a switch means shorts to short the at least two sensing electrodes during a sensing window, within a ST segment.
- 56. (Original) The device of claim 55, wherein the ST segment extends for substantially the length of the ST segment.
- 57. (Currently Amended) The device according to claim 56, wherein the at least two sensing electrodes are located on any one or more of a coronary sinus lead and a right ventricular lead.

58. (Original) In a cardiac stimulation device, a method of monitoring myocardial ischemia comprising:

implementing a pacing scheme;

sensing an intracardiac electrogram signal;

detecting myocardial ischemia based on a change in the electrogram signal; and in response to detecting myocardial ischemia, varying an inter-chamber timing interval in the pacing scheme.

- 59. (Original) The method according to claim 58, wherein varying the inter-chamber timing interval comprises varying an inter-ventricular timing interval.
- 60. (Original) The method according to claim 58, wherein varying the inter-chamber timing interval comprises varying an inter-atrial timing interval.
- 61. (Original) The method according to claim 58, wherein sensing the intracardiac electrogram signal comprises sensing a differential signal between a coronary sinus lead electrode and a right ventricular lead electrode.
- 62. (Original) The method according to claim 58, wherein sensing the intracardiac electrogram signal comprises sensing a differential signal between an active electrode and a case electrode.
- 63. (Original) The method according to claim 58, wherein detecting myocardial ischemia comprises detecting a deviation of an ST-segment of the cardiac electrogram signal by detecting any of:

an elevation of the ST-segment relative to a PQ-segment; an elevation of the ST-segment relative to a TP-segment; a depression of the ST-segment relative to a PQ-segment; a depression of the ST-segment relative to a TP-segment; and an inversion of a T-wave.

- 64. (Original) The method according to claim 63, further comprising switching from a single-chamber ventricular stimulation to biventricular stimulation.
- 65. (Original) The method according to claim 58, further comprising waiting for a predetermined time delay before responding to the detection of myocardial ischemia.
- 66. (Original) The method according to claim 58, further comprising monitoring for myocardial ischemia on a continuous basis.
- 67. (Original) The method according to claim 58, further comprising monitoring for myocardial ischemia on a periodic basis.
- 68. (Original) The method according to claim 58, further comprising monitoring for myocardial ischemia following a user-programmed change in stimulation parameters.
- 69. (Original) The method according to claim 58, wherein sensing the intracardiac electrogram signal comprises electrically coupling at least two sensing electrodes to form a single sensing electrode.
- 70. (Currently Amended) The method of claim 69, wherein electrically coupling the at least two sensing electrodes comprises temporarily shorting at least two sensing electrodes.
- 71. (Currently Amended) The method according to claim 70, wherein electrically coupling the at least two sensing electrodes comprises temporarily coupling at least two sensing electrodes by means of a switch.
- 72. (Currently Amended) The method according to claim 69, wherein electrically coupling the at least two sensing electrodes comprises coupling at least two sensing electrodes on a coronary sinus lead.
- 73. (Currently Amended) The method according to claim 69, wherein electrically coupling the at least two sensing electrodes comprises coupling at least two sensing electrodes on a right ventricular lead.